

IDAHO DEPARTMENT OF WATER RESOURCES
APPROPRIATION APPLICATION ANALYSIS SHEET

W.R. # 96-9253

APPLICATION ID # 73212
INITIAL REVIEW

ENT. 8/13/05 BCA 8/31 OK to Publish 8/31/05

APPLICANT: Kootenai Land Trust LLC BY: RAH DATE: 8/29/05

ITEM REQUIRED INFORMATION

1. ☒ Name and Address
2. ☒ Source
3. ☒ Point of Diversion & County
4. ☒ Quantity
☒ Nature of Proposed Use
☒ Period of Use
5. ☒ Total Quantity
6. ☒ Description of diverting works
7. ☒ Time required for b/u
8. ☒ Proposed use
9. ☒ Place of use or acres irrigated
10. ☒ Other water Rights
11. ☒ Ownership
12. ☒ Map
☒ Signature
☒ Fee (Amt, receipt, acknowledgement)

*** Send info sheet Y() N()

ADDITIONAL INFORMATION

(Yes)(No)

___ Shape File Created Date ___ By: ___
___ Field check: by ___
___ Field report attached
___ Analysis Supp. attached(>5cfs/500af)
___ Water delivered by water master? Water District # ___

PROCESSING

(Yes)(No)

PRIORITY DATE: 7/29/05

___ (Include Moratorium Remark)

___ Statewide Advertising: (Diversion rate greater than 10 cfs or 1,000 af).

CA/Chus
ADVERTISE IN: Kootenai County

LETTERS SENT REQUESTING:

() Dam Information () Fish Information
() Power Information () Other: ___

INFORMATION RECEIVED:

() Dam Information () Fish Information
() Power Information () Other: ___

GROUNDWATER SECTION

WD Permit No.'s: 802566 Tag # 028412 Type: Dom. X Non-Dom. ___ Fees Paid \$ 75.00
10#373469 Dom. ___ Non-Dom. ___ Paid \$ ___
Dom. ___ Non-Dom. ___ Paid \$ ___

Receipt No. N15633

Upgrade Needed?

Y() N()
Y() N()
Y() N()

- ___ Groundwater management area
___ Critical ground water area
___ Well Drilling Permit required
___ Well Drilling Application and Fees received
___ Well Drilling Application approved?

Remarks: [REDACTED]

FINAL REGIONAL PROCESSING/REVIEW

(Yes)(No)

- ___ Notice of pending void order issued. Final order response date: ___/___/___
9/23 ___ Further information required from applicant
___ Affidavit of publication received
___ Application published correctly. If not, record action taken: ___

- 9/7 ___ Publication dates and paper recorded on application
___ Protests received, Final protest date: 10/3/05 Sr. Agent initial ___
___ Measuring device required
___ Measuring port required
___ Special conditions: ___
___ Special conditions of approval supplement and/or cover letter attached: ___

Approval Recommended by: ___ Date: ___/___/___